

Appendix F: Participant Rights

Appendix F-1: Opportunity to Request a Fair Hearing

The State provides an opportunity to request a Fair Hearing under 42 CFR Part 431, Subpart E to individuals: (a) who are not given the choice of home and community-based services as an alternative to the institutional care specified in Item 1-F of the request; (b) are denied the service(s) of their choice or the provider(s) of their choice; or, (c) whose services are denied, suspended, reduced or terminated. The State provides notice of action as required in 42 CFR §431.210.

Procedures for Offering Opportunity to Request a Fair Hearing. Describe how the individual (or his/her legal representative) is informed of the opportunity to request a fair hearing under 42 CFR Part 431, Subpart E. Specify the notice(s) that are used to offer individuals the opportunity to request a Fair Hearing. State laws, regulations, policies and notices referenced in the description are available to CMS upon request through the operating or Medicaid agency.

Agencies are responsible for determining the most appropriate strategy for informing people with developmental disabilities of their human rights and ensuring that individuals understand their rights to the best of their ability to do so. Each person is informed of his/her rights annually and have their signed statement of human rights reviewed with them including the availability of free legal assistance. Each person is also provided with the name and telephone number of the Chairperson of the Human Rights Committee.

A notice of the right to appeal is included in all Medicaid notices and provided to all applicants at intake and at their annual review.

State:	Rhode Island
Effective Date	July 1, 2006

Appendix F-2: Additional Dispute Resolution Process

- a. Availability of Additional Dispute Resolution Process.** Indicate whether the State operates another dispute resolution process that offers participants the opportunity to appeal decisions that adversely affect their services while preserving their right to a Fair Hearing. *Select one:*

<input type="radio"/>	Yes. The State operates an additional dispute resolution process <i>(complete Item b)</i>
<input checked="" type="radio"/>	No. This Appendix does not apply <i>(do not complete Item b)</i>

- b. Description of Additional Dispute Resolution Process.** Describe the additional dispute resolution process, including: (a) the State agency that operates the process; (b) the nature of the process (i.e., procedures and timeframes), including the types of disputes addressed through the process; and, (c) how the right to a Medicaid Fair Hearing is preserved when a participant elects to make use of the process: State laws, regulations, and policies referenced in the description are available to CMS upon request through the operating or Medicaid agency.

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Appendix F-3: State Grievance/Complaint System

a. Operation of Grievance/Complaint System. *Select one:*

X	Yes. The State operates a grievance/complaint system that affords participants the opportunity to register grievances or complaints concerning the provision of services under this waiver <i>(complete the remaining items)</i> .
<input type="radio"/>	No. This Appendix does not apply <i>(do not complete the remaining items)</i>

b. Operational Responsibility. Specify the State agency that is responsible for the operation of the grievance/complaint system:

The Department of Mental Health, Retardation and Hospitals (MHRH).
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c. Description of System. Describe the grievance/complaint system, including: (a) the types of grievances/complaints that participants may register; (b) the process and timelines for addressing grievances/complaints; and, (c) the mechanisms that are used to resolve grievances/complaints. State laws, regulations, and policies referenced in the description are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

<p>The MHRH Licensing regulations (<i>DD 16 Grievances</i>) and RI Law Chapter 40.1-26-5 <i>Participant Grievance Procedure</i> require all agencies to have a written grievance procedure to be utilized to process any type of complaint by people with disabilities, their legal guardians or advocates. The notice of the grievance procedure must include the names of organizations that provide free legal assistance (RI Disability Law Center). Forms are available within specified locations in the agency. Staff assistance is available to the person in exercising his/her right to file a grievance.</p> <p>The agency is required to annually explain the grievance procedure to the person in a manner in which the person understands which could include using various approaches such as verbal communication, written or graphical formats, audio or videotapes, etc.</p> <p>The individual initiates the grievance by filing a grievance form with the Executive Director of the agency who is responsible for forwarding a copy of the completed form to the Chairperson of the Human Rights Committee.</p> <p>The Executive Director of the agency or his/her designee along with the Chairperson of the Human Rights Committee (HRC) or his/her designee is required to investigate and try to resolve the grievance. A written decision on the conclusion of the review of the grievance must be provided to the person with developmental disabilities or their legal guardian or advocate within five business days of receipt of the grievance.</p> <p>If the individual is not satisfied with the decision made by the agency Executive Director and the Chairperson of the Human Rights Committee he/she has the right to appeal that decision under regulations promulgated by the department of MHRH at an administrative hearing.</p>

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